

POSITION _____

INITIALS _____

NOV 1970

DATE _____

FEE DETERMINATION
O.I.P.E. CLASSIFIER
FORMALITY REVIEW
RESPONSE FORMALITY REVIEW

INDEX OF CLAIMS

✓
— Through (numeral)
Referred
Amended
Canceled
Restricted

Claim	Date	Final Disposition	Final Disposition
1		50	
2		51	
3		52	
4		53	
5		54	
6		55	
7		56	
8		57	
9		58	
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33		82	
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35		84	
36		85	
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43		92	
44		93	
45		94	
46		95	
47		96	
48		97	
49		98	
50		99	
51		100	

If more than 150 claims or 10 actions
staple additional sheet here

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